DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 200309793-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and

joint inventor (if plural na patent is sought on the ir	ames iventic	are listed be on entitled:	low) of the	subject matter w	hich is claimed a	nd for which a		
INK-JETTABLE REACTIVE THREE-DIMENSIONAL OF			YSTEMS	FOR FREE-FORM	FABRICATION	OF SOLID		
the specification of which			o unless th	e following box is a	checked:			
() was filed on		as US Application No. or PCT International Application						
Number		the state of the s						
I hereby state that I have including the claims, as disclose all information w	amend	ded by any	amendment	(s) referred to abo	ve. I acknowled	d specification, Ige the duty to		
Foreign Application(s) and/or Continuous I hereby claim foreign priority inventor(s) certificate listed below a filing date before that of the application in the second s	benefits ow and	under Title 35 have also iden	tified below a	ny foreign application fo				
COUNTRY		APPLICATION NUMBER		DATE FILED	PRIORITY CLAIMED	PRIORITY CLAIMED UNDER 35 U.S.C. 119		
					YES:	NO:		
			_		YES:	NO:		
Provisional Application								
I hereby claim the benefit under below:	er Title	35, United Sta	tes Code Sect	ion 119(e) of any Unite	ed States provisional	application(s) listed		
Γ		APPLICATION NUM	BER	FILING DATE	1			
-			-					
U. S. Priority Claim I hereby claim the benefit und insofar as the subject matter of manner provided by the first prinformation as defined in Title application and the national or a second control of the second control	f each aragrap 37, Cod	of the claims o h of Title 35, l le of Federal Re	f this applicat Jnited States gulations, Sec	ion is not disclosed in 1 Code Section 112, I ac tion 1.56(a) which occ	the prior United State knowledge the duty	es application in the to disclose materia		
APPLICATION NUMBER		FILING	DATE	STATUS (patented/pending/abandoned)				
								
POWER OF ATTORNEY: As a named inventor, I hereb business in the Patent and Trac Customer No.	lemark	Office connecte		and/or agent(s) to pro Place Customer Number Bar Code Label here	esecute this applicati	on and transact al		
Send Correspondence to:				Direct Teleph	one Calls To:			
HEWLETT-PACKARD COMI		•		W. Bradley H	lavmond			
P.O. Box 272400 Fort Collins, Colorado 80527-2400				541 715 0159				
I hereby declare that all made on information an with the knowledge th imprisonment, or both, a false statements may jec	d bel at wil under pardiz	ief are belie Iful false st Section 100 e the validit	ved to be t atements a of Title	rue; and further then then then the like so made the United Solication or any pate	nat these statemenade are punished tates Code and the ent issued thereo	ents were made able by fine o that such willfu		
Full Name of Inventor: Laura Kramer				Citizenship: US				
Residence: 386	4 NW	Estaview Pl	Corvallis,O	R 97330				
Post Office Address: Sam	e as F	Residence						
Laura Krand	<u>ነ</u>			7/15/03	•			

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (c ntinued)

ATTORNEY DOCKET NO. 200309793-1

Full Name of # 2 joint inventor:	Vladek P Kasp rchik		Citizenship: US					
Residence:	4308 NW Jon Pl. C rvallis,OR 97330							
Post Office Address: ; / a	Same as resid nc							
/lever	ble! Hes rerde	/_	07/14/03					
Inventor's Signature	a proper and	Date						
Full Name of # 3 joint inventor:	Terry M. Lambright		Citizenship: US					
Residence:	7175 NW Somerset Dr Corvallis,	OR 97330)					
Post Office Address:	Same as Residence							
Irm. Jahr	★ >		7/14/03					
Inventor's Signature		Date						
Full Name of # 4 joint inventor:	Melissa D. Boyd		Citizenship: US					
Residence:	1065 NW Charlemagne Place Con	rvallis,OR	97330					
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malija D.	Burd		7/15/03					
Inventor's Signature		Date						
Full Name of # 5 joint inventor:			Citizenship:					
Residence:								
Post Office Address:								
Inventor's Signature		Date						
Full Name of # 6 joint inventor:	:		Citizenship:					
Residence:								
Post Office Address:								
Inventor's Signature		Date						
oo. o oig.iata.o		Date						
			Otto and block					
Full Name of # 7 joint inventor	:		Citizenship:					
Residence:								
Post Office Address:								
Inventor's Signature		Date						
Full Name of # 8 joint inventor			Citizenship:					
•	:		- Constitution					
Residence:								
Post Office Address:								
Inventor's Signature		Date						